

Recording Requested By:

When recorded mail document to:

NAME

ADDRESS

CITY
STATE & ZIP

Above Space for Recorder's Use Only

AFFIDAVIT OF DEATH OF TRUSTEE

Asssor's Parcel Number:

State of California

County of _____ }

_____, of legal age, being first duly sworn, deposes and says:

1. _____, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person named as Trustee in the certain Declaration of Trustee Dated _____ executed by _____ as trustor(s).
2. At the time of the decedent's death, decedent was the owner, as Trustee, of certain real property acquired by a deed recorded on _____, as instrument No. _____, in the Official Records of _____ County, California, covering the following described property situated in the said County, State of California:
3. I am the surviving or successor Trustee of the same trust under which said decedent held title as trustee pursuant to the deed described above, and am designated and empowered pursuant to the terms of said trust to serve as Trustee thereof.

Dated _____

SUBSCRIBED AND SWORN TO (or affirmed) before me on this _____ day of _____ 20____ by _____ proved to me on the basis of satisfactory evidence to be the persons(s) who appeared before me.

NOTARY SEAL

Notary Signature

Notary Public Commissioned for said County and State